



FORM
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Albuquerque-Santa Fe Federal Executive Board
Shared Neutrals Program

Mediator Continuing Education

NAME (Last, First, MI)	TITLE	
EMPLOYING AGENCY	COMPONENT/DIVISION	
OFFICE ADDRESS	TELEPHONE NUMBER	FAX NUMBER
	EMAIL ADDRESS	

Mediator Continuing Professional Education

List course title and name of the agency sponsoring the training. Include the dates, location and total hours of actual instruction. Include proof of completion for any continuing education completed other than events sponsored by the FEB Shared Neutrals Council.

DATES		COURSE TITLE - SPONSORING AGENCY	LOCATION	HOURS
START	END			

Read and Sign the Following Statement

I hereby certify that the information provided in this form or attached is true to the best of my knowledge and belief and accurately reflects continuing professional education completed by me. I understand that all information herein is subject to verification.

Signature of Mediator

Date

- ☒ **Note to mediator:** Return completed form to the ALB-SF FEB Shared Neutrals Council no later than January 31 of each year. Forward one complete copy of this form to your agency Shared Neutrals Coordinator. **Mediator must be active in the mediation process. The mediator must have participated in at least three (3) mediations within the year (i.e., metro/magistrate court or other type of mediation) in order to be assigned an FEB Shared Neutrals case. If the mediator has been inactive for a period of one (1) year; they will be required to retake the Basic Mediation course.**

Privacy Act Statement: The collection of this information is authorized by 5 U.S.C. 574. This information will be used to update your mediator profile. As a routine use, this information may be disclosed to a congressional office at your request; to OMB for review of private relief legislation; to a labor organization as required by the NLRA or FLRA; where pertinent in a legal proceeding to which the government is a party; to an appropriate law enforcement agency for investigative or prosecutorial purposes; to a government agency where relevant to a hiring, contracting, or licensing decision by the requesting agency; to a government agency in order to elicit information relevant to a hiring, contracting, or licensing decision by the government; to an expert or consultant under contract with the government to fulfill an agency function; to the Federal Records Center for storage; to the Equal Employment Opportunity Commission for investigating a formal EEO complaint filed under 29 C.F.R. 1614; to the Merit Systems Protection Board or Office of Special Counsel for proceedings involving possible prohibited personnel practices. The completion of this form is voluntary; however, if this information is not provided, you may not be included on the Albuquerque-Santa Fe Federal Executive Board Shared Neutrals Program roster of mediators.